

IN THE CLAIMS

This listing of claims will replace all prior versions, and listings, of claims in the application:

Listing of Claims

1. (Previously Presented) A method of downmodulating an autoimmune response in a subject having type I diabetes, comprising administering an effective amount of an antigen binding portion of an anti-CD28 antibody that blocks signaling via CD28 to the subject, such that an autoimmune response in the subject is downmodulated.

2. (Original) The method of claim 1, wherein the antigen binding portion is a scFv molecule or an Fab fragment.

3. (Original) The method of claim 1, wherein the antigen binding portion is humanized.

4. (Original) The method of claim 1, wherein the antigen binding portion is fully human.

5-8. (Canceled)

9. (Previously Presented) A method of downmodulating an ongoing immune response in a subject having type I diabetes comprising administering an effective amount of an antigen binding portion of an anti-CD28 antibody that blocks signaling via CD28 to the subject, such that an ongoing autoimmune response in the subject is downmodulated.

10. (Original) The method of claim 9, wherein the antigen binding portion is a scFv molecule or an Fab fragment.

11. (Original) The method of claim 9, wherein the antigen-binding portion is humanized.

12. (Original) The method of claim 9, wherein the antigen-binding portion is fully human.

13-27. (Canceled)

28. (Previously Presented) The method of claim 2, wherein the antigen binding portion is a scFv molecule.

29. (Previously Presented) The method of claim 28, wherein the scFv molecule is PV1.

30. (Previously Presented) The method of claim 10, wherein the antigen binding portion is a scFv molecule.

31. (Previously Presented) The method of claim 30, wherein the scFv molecule is PV1.

32. (Original) A method of downmodulating a CD28-mediated interaction in a subject having type I diabetes comprising administering an effective amount of an antigen binding portion of an anti-CD28 antibody that blocks signaling via CD28 to the subject, such that a CD28 interaction in the subject is downmodulated.

33. (Original) The method of claim 32, wherein the antigen binding portion is a scFv molecule or an Fab fragment.

34. (Previously Presented) The method of claim 32, wherein the antigen-binding portion is humanized.

35. (Previously Presented) The method of claim 32, wherein the antigen-binding portion is fully human.

36. (Original) The method of claim 32, wherein the antigen binding portion is a scFv molecule.

37. (Previously Presented) The method of claim 33, wherein the scFv molecule is PV1.

38. (New) A method of downmodulating an autoimmune response in a subject having type I diabetes, comprising administering an effective amount of an antigen binding portion of an anti-CD28 antibody that blocks signaling via CD28 to the subject, such that an autoimmune response in the subject is downmodulated, wherein the antigen binding portion is a scFv molecule, and wherein the scFV molecule is PV1.

39. (New) A method of downmodulating an ongoing immune response in a subject having type I diabetes comprising administering an effective amount of an antigen binding portion of an anti-CD28 antibody that blocks signaling via CD28 to the subject, such that an ongoing autoimmune response in the subject is downmodulated, wherein the antigen binding portion is a scFv molecule, and wherein the scFV molecule is PV1.

40. (New) A method of downmodulating a CD28-mediated interaction in a subject having type I diabetes comprising administering an effective amount of an antigen binding portion of an anti-CD28 antibody that blocks signaling via CD28 to the subject, such that a CD28 interaction in the subject is downmodulated, wherein the antigen binding portion is a scFv molecule, and wherein the scFV molecule is PV1.